

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NAME **NC Machinery Company**
ADDRESS **1178 NW Maryland**
Chehalis, WA 98532

COUNTY **Lewis**

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

ST 6141
PERMIT NUMBER

001
DISCHARGE NUMBER

Submit Quarterly

**NOTE: Read instructions
before completing this form.**

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
		01	TO			
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT	Report	Report	Gpd					n/a	01/90	Metered	
Oil and Grease	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT					100	100	mg/L	0	01/90	Grab	
Total Suspended Solids	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT					300	300	mg/L	0	01/90	Grab	
pH	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT				6		9	s.u.	0	01/90	Grab	
Temperature	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT					150	150	°F	0	01/90	Grab	
Arsenic	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT					0.23	0.23	mg/L	0	01/90	Grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)				TELEPHONE			DATE			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			AREA CODE	NUMBER	YEAR	MO

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Cadmium	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.15	0.15	mg/L	0	01/90	Grab
Chromium	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						2.0	2.0	mg/L	0	01/90	Grab
Copper	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.25	0.25	mg/L	0	01/90	Grab
Cyanide	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.4	1.4	mg/L	0	01/90	Grab
Lead	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.14	0.14	mg/L	0	01/90	Grab
Nickel	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.8	1.8	mg/L	0	01/90	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)					TELEPHONE			DATE		
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Selenium	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.2	0.2	mg/L	0	01/90	Grab
Silver	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.16	0.16	mg/L	0	01/90	Grab
Zinc	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.4	1.4	mg/L	0	01/90	Grab
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